

17613 U.S. PRO
10/634687
08/05/03

**UTILITY PATENT APPLICATION
TRANSMITTAL**
(For new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. **SO-0017 US NA**
First Named Inventor or Application Identifier
Hari Babu Sunkara

"EXPRESS MAIL CERTIFICATE"**"EXPRESS MAIL" MAILING LABEL NUMBER** EJ 229909084 US**DATE OF DEPOSIT:** August 5, 2003

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop: Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

NAME OF PERSON MAILING PAPER OR FEE
(TYPE OR PRINT) Jeannette Y. Rayfield

SIGNATURE SIGN

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to Deposit Account No. <u>04-1928</u>. <input checked="" type="checkbox"/> General Authorization to charge any and all fees under 37 CFR 1.16 or 1.17, including petitions for extensions of time, relating to this application. (37 CFR 1.136(a)(3)) <i>(Submit an original, and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> A Check in the Amount of \$ _____ is enclosed <input type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required and credit any overpayment to Deposit Account <u>04-1928</u>.</p> <p>3. <input checked="" type="checkbox"/> The total fee is calculated as shown below: Basic Filing fee \$ 750.00 Total Claims 31 - 20 = 11 x \$18 \$ 198.00 Independent Claims 3 - 3 = 0 x \$84 \$ 0.00 <input type="checkbox"/> Multiple Dependent Claim present \$ 0.00 TOTAL FILING FEE \$ 948.00 <input type="checkbox"/> Reduction by 50% for filing by Small Entity \$ _____ <input type="checkbox"/> Cancel in this application original claims _____ to _____ of the prior application before calculating the filing fee. Charge \$ _____ to the above indicated Deposit Account.</p> <p>4. <input checked="" type="checkbox"/> Specification excluding Drawings [Total Pages] <u>19</u></p> <p>5. <input type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets]</p> <p>6. <input checked="" type="checkbox"/> Declaration and Power of Attorney [Total Pages] <u>4</u> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 19a completed)</i> c. <input checked="" type="checkbox"/> Unsigned Declaration <i>[Note Box 6 below]</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>7. <input checked="" type="checkbox"/> Application Data Sheet 37 CFR 1.76</p> <p>8. <input type="checkbox"/> Incorporation By Reference <i>(useable if Box 6b is checked)</i> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 6b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p> <p>20. Priority Information, check appropriate box and supply the requisite information a. The accompanying application is a <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part Of prior application No: filed . Examiner: Group/Art: _____</p> <p>21. CORRESPONDENCE ADDRESS <input checked="" type="checkbox"/> Customer Number: <u>23906</u> Address E.I. du Pont de Nemours and Company Telephone (302) 984-6139 Fax (302) 658-1192</p> <p>22. <i>RESPECTFULLY SUBMITTED,</i> Signature Name _____ Date _____ Registration No. <u>27,095</u></p>		<p>9. <input checked="" type="checkbox"/> The Title of the Invention: REMOVAL OF COLOR BODIES FROM POLYTRIMETHYLENE ETHER GLYCOL POLYMERS</p> <p>10. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies d. <input type="checkbox"/> Use the identical computer-readable form filed in Application No. _____, filed as the computer-readable form for the instant application. (37 CFR 1.821(e))</p> <p>11. <input type="checkbox"/> ACCOMPANYING APPLICATION PARTS a. <input type="checkbox"/> Information Disclosure Statement (IDS) b. <input type="checkbox"/> PTO-1449 c. <input type="checkbox"/> Copies of all IDS Citations</p> <p>12. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>13. <input type="checkbox"/> Prior Application is Assigned to: <u>E.I. du Pont de Nemours and Company</u> <i>(for continuation/divisional with Box 20a completed)</i></p> <p>14. <input type="checkbox"/> Preliminary Amendment</p> <p>15. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></p> <p>16. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>17. <input type="checkbox"/> Transfer all references cited by Applicants or by the Examiner from the parent Application Serial No. filed. A PTO-1449 listing the references is enclosed.</p> <p>18. <input type="checkbox"/> Applicant Claims Small Entity Status</p> <p>19. <input type="checkbox"/> Other : _____</p>
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list d item(s)

23. The Power of Attorney in the Prior Application includes: _____

Recognize as Associate Attorney: _____
Attorney _____ Registration No. _____
and address future correspondence to same as indicated in Box 21.

The invention was made by an agency of the U. S. Government or under a contract with an agency of the U. S. Government.

No.

Yes, the name of the U.S. Government agency and the Government contract number are: _____.

(preferred arrangement of specification set forth below)

- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (*if filed*)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

 Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 948.00)

Complete if Known

Application Number	Unknown
Filing Date	August 5, 2003
First Named Inventor	Hari Babu Sunkara
Examiner Name	Unknown
Group / Art Unit	Unknown
Attorney Docket No.	SO-0017 US NA

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None Deposit Account:

Deposit Account Number

04-1928

Deposit Account Name

E. I. du Pont de Nemours and Company

The Commissioner is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee Description	
1001 750	2001 375	Utility filing fee	750.00
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$ 750.00)

2. EXTRA CLAIM FEES

		Extra Claims	Fee from below	Fee Paid
Total Claims	31	-20**	= 11	X 18 = 198
Independent Claims	3	-3**	= 0	X 84 = 0
Multiple Dependent	<input type="checkbox"/>		X 280	= 0

Large Entity

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$ 198.00)

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity

Small Entity

Fee Code	Fee Code	Fee Description	Fee Paid
1051 130	2051 65	Surcharge – late filing fee or oath	
1052 50	2052 25	Surcharge – late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 410	2252 205	Extension for reply within second month	
1253 930	2253 465	Extension for reply within third month	
1254 1,450	2254 725	Extension for reply within fourth month	
1255 1,970	2255 985	Extension for reply within fifth month	
1401 320	2401 160	Notice of Appeal	
1402 320	2402 160	Filing a brief in support of an appeal	
1403 280	2403 140	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive – unavoidable	
1453 1,300	2453 650	Petition to revive – unintentional	
1501 1,300	2501 650	Utility issue fee (or reissue)	
1502 470	2502 235	Design issue fee	
1503 630	2503 315	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 750	2809 375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810 750	2810 375	For each additional invention to be examined (37 CFR § 1.129(b))	
1801 750	2801 375	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify) _____

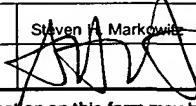
*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 0)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Steven A. Markowitz	Registration No. Attorney/Agent	27,095	Telephone	(302) 984-6139
Signature				Date	August 5, 2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop: Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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REMOVAL OF COLOR BODIES FROM POLYTRIMETHYLEN ETHER GLYCOL POLMERS

Application No.: Unknown
Filing Date: August 5, 2003
First Named Inventor: Hari Babu Sunkara
Group Art Unit: Unknown
Examiner: Unknown
Attorney Docket: SO-0017 US NA

Application – 19 pages
Declaration/Power of Attorney (not executed)
Fee Transmittal
Authorization to charge Deposit Account 04-1928
Postcards